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| Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818). | | | Application Number 10/665,517 | | 10/665,517 | |
|--|---|---------------------------|------------------------------------|----------------------|------------------------|---------------------------------------|
| FEE TRANSMITTAL | | | Filing Date | iling Date September | | 2, 2003 |
| For FY 2006 | | | First Named In | ventor | Stamm | |
| F01 F1 2006 | | | Examiner Name | • | Sheikh | |
| Applicant claims small entity status. See 37 CFR 1.27 | | Art Unit | | 1615 | | |
| TOTAL AMOUNT OF PAYMENT (\$) 1150.00 | | | Attorney Docket No. 31672-2246 | | | 1 |
| METHOD OF PAYMENT (check all that apply) | | | | | | |
| Check Credit Card Money Order None Other (please identify): | | | | | | |
| X Deposit Account Deposit Account Number: 22-0261 Deposit Account Name: Venable LLP | | | | | | |
| For the above-identified deposit account, the Director is hereby authorized to: (check all that apply) | | | | | | |
| X Charge fee(s) indicated below Charge fee(s) indicated below, except for the filing fee | | | | | | |
| Charge any additional fee(s) or underpayment of fee(s) under 37 CFR 1.16 and 1.17 | | | | | | |
| | | | | | | |
| FEE CALCULATION (All the fees below are due upon filing or may be subject to a surcharge.) | | | | | | |
| 1. BASIC FILING, SEARCH, AND EXAMINATION FEES FILING FEES SEARCH FEES EXAMINATION FEES | | | | | | |
| | | Small Entity | Small Entity | | Small Entity | |
| Application Type | Fee (\$) | Fee (\$) Fee (\$ | | Fee (\$) | Fee (\$) | Fees Paid (\$) |
| Utility | 300 | 150 500 | 250 | 200 | 100 | · · · · · · · · · · · · · · · · · · · |
| Design Plant | 200 200 | 100 100 | 50 | 130 | 65 | |
| Reissue | 300 | 100 300 150 500 | 150 250 | 160 600 | 80 300 | |
| Provisional | 200 | 100 0 | 230 | 000 | 300 0 | |
| 2. EXCESS CLAIM FEES | 200 | 100 0 | U | U | U | Small Entitu |
| Fee Description | | | | | | Small Entity Fee (\$) Fee (\$) |
| Each claim over 20 (including Reissues) | | | | | | 50 25 |
| Each independent claim over 3 (including Reissues) | | | | | | 200 100 |
| Multiple dependent claims 360 180 | | | | | | |
| | Extra | an (f) Foo l | a-i-d (6) | 3.0 | ultimle Denemde | unt Claima |
| - 20 or HP | Total Claims Claims Fee (\$) Fee Paid (\$) Multiple Depen | | | | | |
| HP = highest number of total claims paid for, if greater than 20. | | | | | | |
| Indep. Extra | | | | | | |
| Claims | | | | | | |
| - 3 or HP = X = HP = highest number of total claims paid for, if greater than 3. | | | | | | |
| 3. APPLICATION SIZE FEE | | | | | | |
| If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer | | | | | | |
| listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 | | | | | | |
| sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s). Total Sheets Extra Sheets Number of each additional 50 or fraction thereof Fee (\$) Fee Paid (\$) | | | | | | |
| - 100 = _ | | /50 | round up to a whol | | | ree raiu (\$) |
| 4. OTHER FEE(S) Fees Paid (\$) | | | | | | |
| Non-English Specification, \$130 fee (no small entity discount) | | | | | | |
| | | | | | | \$1020.00 |
| surcharge): X Terminal Disclaimer fee 130.00 | | | | | | |
| SUBMITTED BY | MAN | O Mult | | | | |
| Signature | VIXIVAL | 1 NV// \ | Registration No. (Anomey/Agent) | 38,898 | Telephone | |
| Name (Print/Type) Edward (| D. Grieff | - × × / \ | 1 | | Date | May 2, 2006 |
| This collection of information is req | uired by 37 CFR | 1.136. The information is | equired to obtain or re | etain a benet | it by the public which | |

Inis collection of information is required by 37 QFR 1.136. The information ig required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S. L. 122 and 37 CFR 1.14. This collection is estimated to take 30 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete the form and on suggestions to reducing this burden, should be sent to the Chief Information Officer, U.S. Patent Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.